

Utah Photography Teacher Examination Registration Form

October 14, 2017

Lehi High School

| | | |
|-----------------------|-------|-------|
| Name: _____ | | |
| CACTUS ID#: _____ | | |
| School: _____ | | |
| School Address: _____ | | |
| _____ | _____ | _____ |
| City | State | Zip |
| Phone: _____ | | |
| Fax: _____ | | |
| E-mail: _____ | | |

Please return this form and a check payable to **SkillsUSA Utah** for the amount of **\$45** by **Friday, September 15, 2017** to:

Dave Milliken, Specialist
Skilled & Technical Sciences Education
Utah Board of Education
P O Box 144200
Salt Lake City, UT 84114-4200
Fax: (801) 538-7868